## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITIÓN	INITIALS	ID NO.	DATE	
FEE DETERMINATION	T-G		12/3/01	
O.I.P.E. CLASSIFIER				
FORMALITY REVIEW	TH	953	12-17-01	
RESPONSE FORMALITY REVIEW	2m	FSP	05/21/02	
	<b>7</b>		10-10-10	

## **INDEX OF CLAIMS**

V	Rejected	N	***************************************	Non-elected
=	Allowed	- 1	***************************************	Interference
_	(Through numeral) Canceled	Α		Appeal
÷	Restricted	0		Objected

— (Through numeral) Canceled A						
Claim	Date	Claim	Date	Claim	Date	
Final micro		Final Original		Final Original	,	
2/	<del></del>	51 52		101		
3		53		103		
4		54		104		
5	<del>                                     </del>	55		105		
6 7	<del>                                     </del>	56 57		106	<del>                                     </del>	
8 7	<del>┤┤┤┤┤</del> ┤	58		107		
9 1	<del>                                     </del>	59	<del>-                                     </del>	109	<del>                                     </del>	
10 14		60		110		
0		61		111		
12		62		112		
13		63 64		113		
15	<del>╎╞</del> ┼┼┼┼┤	65	<del>-                                     </del>	114		
16		66		116	<del></del>	
17		67		117		
18		68		118		
19		69		119		
20		70		120		
21 22 1		71	<del></del>	121		
23	<del>╒┋</del>	72 73		122		
24		74	++++	124		
25		75		125		
26		76		126		
27		77		127		
28 2	<del>-                                     </del>	78 79		128		
30 (	<del></del>	80		129		
(31)	<del>- - - - - - - - - - - - - - - - - - - </del>	81		131	<del></del>	
32		82		132		
33		83		133		
34	<del></del>	84		134		
36	<del>                                     </del>	85	<del></del>	135	+	
37		87		137	<del></del>	
38		88	+ + + + + + + + + + + + + + + + + + + +	138	<del></del>	
39		89		139		
40		90		140		
41		91		141		
42 🗸	<del>                                     </del>	92	+	142		
43	<del>                                     </del>	93	++++	143	<del>                                     </del>	
45		95	+ + + + + + + + + + + + + + + + + + + +	144	<del></del>	
46	<del>-                                     </del>	96	<del>             </del>	146	<del>┤┤┤┤┤</del>	
47		97		147	<del></del>	
48		98		148		
50		99		149		
		100		150		

If more than 150 claims or 10 actions staple additional sheet here

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